

2700 INTERNAL TRANSFER REQUEST FOR S.N.

09/726, 010

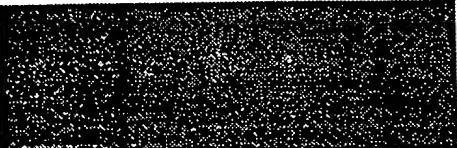
| | | |
|-----------------------------|---|--------------|
| DATE: <u>12/15/00</u> | FROM: <u>CARZONE</u> | (print name) |
| <u>2/13/01</u> | REASON(S): | |
| FORWARD TO: | A. You had Parent | |
| A. Art Unit: <u>2164</u> | <input type="checkbox"/> (check box) | |
| B. Class: <u>705</u> | <input type="checkbox"/> (check box) | |
| C Subclass: <u>37</u> | <input checked="" type="checkbox"/> (check box) | |
| D. See Claim(s): <u>1-5</u> | | |

FURTHER EXPLANATION IF NEEDED:

Electronic Auctions

| | | |
|------------------------|--------------------------------------|--------------|
| DATE: _____ | FROM: _____ | (print name) |
| FORWARD TO: | REASON(S): | |
| A. Art Unit: _____ | A. You had Parent | |
| B. Class: _____ | <input type="checkbox"/> (check box) | |
| C Subclass: _____ | <input type="checkbox"/> (check box) | |
| D. See Claim(s): _____ | | |

FURTHER EXPLANATION IF NEEDED:

| | | |
|---|--------------------------------------|--------------|
| DATE: _____ | FROM: _____ | (print name) |
| FORWARD TO CLASSIFIER  | REASON(S): | |
| A. You had Parent | <input type="checkbox"/> (check box) | |
| B. See Title | <input type="checkbox"/> (check box) | |
| C. See Abstract | <input type="checkbox"/> (check box) | |
| D. See Claim(s): _____ | | |

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

| | | |
|------------------------|--------------------------------------|--|
| DATE: _____ | CLASSIFIER: _____ | |
| FORWARD TO: | REASON(S): | |
| A. Art Unit: _____ | A. You had Parent | |
| B. Class: _____ | <input type="checkbox"/> (check box) | |
| C Subclass: _____ | <input type="checkbox"/> (check box) | |
| D. See Claim(s): _____ | | |

FURTHER EXPLANATION IF NEEDED: